

**U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
*National Recovery Month Planning Partners Meeting***

Wednesday, January 26, 2011

8:30 a.m. – 3:00 p.m.

Hilton Crystal City at Washington Reagan National Airport

Participants

Reverend Cynthia Abrams
Abdelwahhab Alawneh
Daphne Baille
George Bowden
Monique Bourgeois
William Caltrider, Jr.
Page Chiapella
Brian Chodrow
Donna Cotter
Mary Swart Cumings
Candace Daniels
John de Miranda
Dona Dmitrovic
Robert Foster
Maryanne Frangules
Kent Gade
Peter Gaumond
Jim Gillen
Walter Ginter
Vickie Griffiths

Beverly Haberle
Steve Hornberger
Benjamin Jones
Andrew Kessler
Susanna Konner
Joan Kub
Alan Levitt
Therissa Libby
Robert J. Lindsey
Nataki MacMurray
Megan Mallon
Mike Mason
Mimi Martinez McKay
Lureen McNeil

Holly Merbaum
Karen Mierly
Penny Mills
Cynthia Moreno-Tuohy

Organization

General Board of Church and Society, The United Methodist Church
Arab and Middle East Resource Center (AMERC)
TASC, Inc.
SMART Recovery
Association of Recovery Schools
Center for Alcohol and Drug Research and Education
National Institute on Alcohol Abuse and Alcoholism (NIAAA)
National Highway Traffic Safety Administration
Recovery North Carolina
Alcoholics Anonymous
Mental Health America
Stepping Stone of San Diego, Inc.
RASE Project
National Association of Drug Court Professionals
Massachusetts Organization for Addiction Recovery
The Benevolent and Protective Order of the Elks of the USA
Office of National Drug Control Policy
The Providence Center
National Alliance for Medication Assisted Recovery
Jewish Alcoholics, Chemically Dependent Persons and Significant Others
PRO-ACT
National Association for Children of Alcoholics
National Council on Alcoholism and Drug Dependence - Detroit
Friends of SAMHSA
Office of National Drug Control Policy
International Nurses Society on Addictions
National Association for Children of Alcoholics
TA Libby Group
National Council on Alcoholism and Drug Dependence
Office of National Drug Control Policy
McShin Foundation
McShin Foundation
Texas Department of State Health Services
New York State Office of Alcoholism and Substance Abuse Services
Capitol Decisions, Inc
Nar-Anon
American Society of Addiction Medicine
NAADAC, The Association for Addiction Professionals

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Julia Parnell	Minnesota Recovery Connection
Daniel Payne	McShin Foundation
Joe Powell	Association of Persons Affected by Addiction
William Spencer Reilly	Odyssey Networks
Claire Ricewasser	Al-Anon Family Group Headquarters, Inc., World Service Office
Rebecca Sanchez-Barrett	Poison Control Program
John Shinholser	McShin Foundation
Jack Sinclair	YRD Productions
Pat Taylor	Faces & Voices of Recovery
Anne Thompson	Connecticut Turning to Youth and Families
Mat Tomber	Odyssey Networks
Becky Vaughn	State Associations of Addiction Services
Kateri Vergez	White Bison, Inc.
Beth Ann Vinson	Sagebrush of Virginia
Harvey Weiss	Synergies; National Inhalant Prevention Coalition
James G. White	Faith Partners, Inc.

SAMHSA Staff

Sarah Ikenberry	SAMHSA/CSAT
Robert Lubran	SAMHSA/CSAT
Michele Monroe	SAMHSA/CSAT
Abraham Ruiz	SAMHSA/CSAT
Ivette Torres	SAMHSA/CSAT
Evereta Thinn	SAMHSA/CSAT
Mark Weber	SAMHSA/OC

Abt/Edelman/ICF Macro Staff

Paul Cheh	Abt Associates Inc
Diane Fraser	Abt Associates Inc
Sara Jacobson	Edelman
Melanie Pipkin	Edelman
Cori Sheedy	Abt Associates Inc
Megan Smith	Edelman
Heather Stephenson	Edelman

ORC/Macro

Bill Beard	ICF/Macro International
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I. Welcome and Introductions: Ivette Torres, SAMHSA/CSAT

Ms. Torres welcomed everyone to the January *Recovery Month* Planning Partners meeting.

Ms. Torres stated that 11 new Planning Partners joined in 2010 and she encouraged the Planning Partners to inform SAMHSA/CSAT regarding potential partners who are appropriate for and interested in partnering with *Recovery Month*. Ms. Torres then reviewed the purpose of *Recovery Month*, stated

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that recovery from both mental health issues and substance use disorders are emphasized in ***Recovery Month's*** goals, objectives, and materials and reviewed the agenda.

Planning Partner Updates

Planning Partners provided updates on their organizations' activities, which included:

- George Bowden stated that SMART Recovery is a science- and abstinence-based nationwide recovery support system.
- John de Miranda reported that he represented both Stepping Stone San Diego, and Voices of Recovery for San Mateo County.
- Anne Thompson introduced Connecticut Turning to Youth and Families as an organization that helps young people gain recovery support.
- Pat Taylor stated that the Faces and Voices of Recovery 2011 Rally for Recovery is scheduled for September 24, 2011 and monthly organizing calls will start in April.
- Brian Chodrow from the U.S. Department of Transportation stated that they work with ***Recovery Month*** on DWI courts.
- Julia Parnell announced that she represented the Minnesota Recovery Connection.
- Monique Bourgeois stated that the Association of Recovery Schools is working with the State of Minnesota.
- Steve Hornberger stated that the National Association for Children of Alcoholics' (NACoA) Celebrating Families Program will be sponsored by the State of Minnesota, and that system of care sites in Oklahoma will also use it. He also stated that NACoA is working with Frederick County, Maryland on their ***Recovery Month*** event in September
- Kateri Verges stated that White Bison launched their grief recovery training last month and will hold monthly trainings throughout the country all year long, with most trainings focusing on the healing of women. White Bison is also releasing a new book: *The Wellbriety Movement Comes of Age*. Ms. Verges announced that in 2011, White Bison will publish their documentary on Native American Boarding Schools.
- James White informed the group that Faith Partners has a new project for recovery support in distressed communities, with outreach ministries for African American pastors. Mr. White stated that they have culturally specific programs for African Americans.
- Claire Ricewasser reported that Al-Anon's public service announcements (PSAs) are now in the top 5% nationally for PSAs. Ms. Ricewasser stated that they are working on a new video and on a feature article for Al-Anon's 60th Anniversary in May. Ms. Ricewasser stated that they are developing workgroups for outreach to treatment centers, and are working on the 2012 survey. The 2009 results are posted on the Al-Anon website, <http://www.al-anon.alateen.org/survey.html>. She reminded the Partners that they survey their members, and if a Partner has a research project, ALANON has over 900 members who can participate.
- Vicki Griffiths stated that Jewish Alcoholics, Chemically Dependent Persons, and Significant Others organization educates the Jewish community on addiction and recovery, to increase awareness on addiction and recovery in the Jewish community. Her organization helps Jewish people struggling with addiction recognize that they're not alone, and to help them get support and spiritual assistance in synagogues.

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- Ben Jones reported that The National Council on Alcoholism and Drug Dependence-Detroit's last ***Recovery Month*** event was very successful and encouraged year-round participation in events, with culminating activities in September. Mr. Jones stated that they are working to build on that success and get more participation. He informed the group that over 3,000 people signed the petition for the Recovery Bill of Rights in Michigan.
- Bill Caltrider stated he will represent the Center for Alcohol and Drug Research and Education in March for the conference on Narcotic Drugs in Vienna.
- John Shinholser stated that he is the founder of the McShin Foundation.
- Mimi Martinez McKay reported that the Texas Department of State Health Services, Community Mental Health and Substance Abuse Services has a new vision and mission that focuses on recovery, and that they have a new annual Institute on Recovery. For ***Recovery Month***, the State of Texas will hold a Statewide rally on September 24, 2011.
- Joe Powell stated that the Association of Persons Affected by Addiction looks forward to the recovery activities in Texas this year. He stated that they just held their advocacy forum last week.
- Jim Gillen reported that The Providence Center is participating in a State recovery rally on September 10, 2011 as part of Waterfire, an arts celebration that occurs along the river in Providence.
- Andrew Kessler stated that the Institute for Certification of Recovery Counselors provides testing standards and certification for Substance Abuse Counselors. He said that recovery is becoming more and more important in health care. Mr. Kessler also stated that Friends of SAMHSA now has 1,000 members, and they are hoping to utilize it as a powerful grassroots tool to promote SAMHSA's programs.
- Walter Ginter stated that the National Alliance for Medication Assisted Recovery has been refunded through a Recovery Community Services Program (RCSP) grant.
- John Magnuson introduced himself as a friend of Ivette Torres and supporter of the recovery movement.
- Mike Mason introduced himself from the McShin Foundation.
- Daniel Payne introduced himself as the Executive Director of the McShin Foundation.
- Megan Mallon introduced herself from the McShin Foundation.
- Beth Anne Vinson introduced herself from Sagebrush of Virginia.
- Kent Gade announced that The Elks National Drug Awareness Program is the largest volunteer organization in the country and that it has distributed 8,000 pieces of material, all for free. He stated that The Elks Hard Choices comic books are very successful, as well as their *Your Choice, Your Voice* music video with Milton Crea, which comes with a training and education kit, and is available for teachers and others who work with youth.
- Page Chiapella reported that National Institutes of Health/National Institute on Alcohol Abuse and Alcoholism's (NIH/NIAAA) recovery project on alcohol abuse and treatment research is funding additional recovery grants.
- Mary Cummings with Alcoholics Anonymous stated that they now have videos created by their youth members on their website. Ms. Cummings reported that they are updating their literature for their members in the armed forces, and are also preparing to go into e-publishing.
- Bill Reilly announced that Odyssey Networks is working on a documentary about a woman who is running marathons across the world to raise awareness about recovery.

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- Bob Lindsay reported that the National Council on Alcoholism and Drug Dependence has over 100 affiliates around the country, and that 750,000 people have called them for help. He also stated they are implementing a new strategic plan, with a new website that should be live by April 1st. Mr. Lindsay informed the group that NCADD will host the ***Recovery Month*** luncheon in September and that they finished their year end donor's appeal and had the greatest response thus far.
- Beverly Haberly reported that the Council of Southeastern Pennsylvania and PROACT hosted the National Walk and Rally for Recovery last year, where they had 11,000 people marching to support recovery. She stated that their organization is now part of the NIATx Project, a quality improvement project for recovery community centers to expand their recovery services.
- Abdelwahhab Alewneh reported the Arab and Middle East Resource Center's (AMERC) mission is to educate the Arab community on addiction, recovery and treatment, and to provide services for them.
- Alan Levitt stated the National Association of Children of Alcoholics' (NACoA) Children of Alcoholics week is February 13-19, 2011. Additionally, on February 15, 2011, Nickelodeon will host a show on children of alcoholics.
- Candace Daniels introduced herself from Mental Health America.
- Holly Merbaum announced that Capitol Decisions is working on parity, and set up a website, <http://www.mentalhealthparitywatch.org>, for consumers to appeal claims and get information on parity. Capitol Decisions has also set up a toll-free number (866-882-6227) and email address (info@mentalhealthparitywatch.org) to answer consumer questions.
- Joan Kub reported that The International Nurses Society on Addictions is holding their annual conference September 7–10, 2011, on the management of pain and addictions. They will accept abstracts through February 14, 2011.
- Rob Foster stated that The National Association of Drug Court Professionals will hold their conference in July with expected attendance of 4,000.
- Daphne Baille reported that TASC in Illinois works with justice systems to ensure people in the system get access to treatment and that the U.S. has the highest incarceration rate in the world. She stated that TASC advocates provide treatment before incarceration, and that they are looking at health care reform and how it affects the justice system. Ms. Baille reported they are also involved in racial justice, as there are a significantly disproportionate number of African Americans incarcerated for drug related crimes. Ms. Baille informed the Partners of the website, www.centerforhealthandjustice.org.
- Donna Cotter from Recovery North Carolina informed the group about a campaign to engage people in recovery to advocate for better services. Ms. Cotter said that the State of North Carolina had the largest number of recovery events last year, growing from 50 to 86 events and that the campaign for recovery in North Carolina started in 2008 and now has more than 10,600 signatures.
- Cynthia Abrams reported that the National United Methodist Church works on addiction, prevention, and recovery projects as well as mental health projects, and that their main task is to build bridges and make connections for their 8.1 million members.
- Harvey Weiss reported that the National Inhalant Prevention Coalition will kick off their campaign on March 17, 2011 at the National Press Club.
- Dona Dmitrovic stated that the RASE Project provides recovery support services for people on buprenorphine. She reported that they participated in the PROACT walk and rally last year, and

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that they are kicking off their recovery center in Lancaster, Pennsylvania within the next 30 days.

- Rebecca Sanchez-Barrett from the Health Resources and Services Administration (HRSA) reported that HRSA funds poison centers around the country and has a national 800 poison hotline number.
- Evereta Thinn introduced herself as an intern at SAMHSA/CSAT.
- Peter Gaumond introduced himself as the Branch Chief of a newly created Recovery Branch at ONDCP. The Branch has a goal of bringing recovery to the national policy discussion in order to create services and systems that support long-term recovery.
- Lureen McNeil announced that the New York State Office of Alcoholism and Substance Abuse Services has an opportunity to create recovery-oriented systems of care (ROSC) and that within their target populations are the military, criminal justice, and child welfare. She said that right now they are focusing on the Jewish orthodox community and young adults aged 18-24. She said that they have an initiative for faith and community groups to come together to create recovery community centers that are not dependent on State or Federal funds.
- Cynthia Moreno Tuohy reported that NAADAC, The Association for Addiction Professionals will broadcast a webinar series on health care reform with NASADAD and NCADD. The series of 13-15 webinars will cover such topics as addiction issues, parity, and workforce development. They are also conducting trainings around the country on co-occurring disorders and will hold their national conference in San Diego on September 17-22, 2011. For additional information, visit www.naadac.org.
- Theresa Libby announced that the Libby Group focuses on addiction science and recovery advocacy. She states that they are working with faith-based organizations and an addiction team for the Unitarian Universalist Church to develop services at Universalist churches.
- Maryanne Frangules reported that the Massachusetts Organization for Addiction Recovery had two policymakers at their Ride for Recovery, which was also their 20th celebration of ***Recovery Month***. She declared that despite losing the campaign against the repeal of the alcohol tax in the State, their efforts helped to build participation and support of addiction treatment and recovery.

II. 2012 *Recovery Month* Observance: Ivette Torres, SAMHSA/CSAT and Megan Smith, Sara Jacobson, Edelman

Megan Smith introduced the objectives for the 2012 campaign and stated that they used SAMHSA's Strategic Initiatives and the Department of Health and Human Services' (HHS) Strategic Plan to formulate the concepts, objectives, and audiences. Specifically, the new Initiative, Recovery Support, and the four "prongs" of recovery—health, home, purpose, and community—are woven into the themes.

Sara Jacobson presented the first concept: *The Value of One's Community and Home*. Ms. Jacobson stated that this concept expands upon one of SAMHSA's goals: to connect people and communities. ***Recovery Month*** can spread the message that everyone can live a high-quality, self-directed, satisfying

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life in the community, which includes good health, a home, and a purpose. Targeted Outreach audiences for Concept 1 were:

- Recovery Services
- Active Military, Veterans and Families
- Recovery Support
- Youth and Young Adults (School)

Ms. Smith presented the second concept: *Owning Your Recovery*. Ownership and management of one's condition can help prevent a substance use or mental health problem from deepening. Relatives of someone with a behavioral health condition can take control of their own futures by implementing preventative measures to help avoid engaging in substance use or to recognize the signs of a mental health condition. Targeted Outreach audiences for Concept 2 were:

- Active Military, Veterans and Families
- Individuals and Families within the Justice System
- Families and Friends
- The Recovery Community

Ms. Smith presented the third concept: *Communication and Coordination of Care*. Many elements tie into coordinating care, including promotion of health IT, access to support services, and workplace and housing assistance, to name a few. This theme will educate target audiences—from the consumer to the provider—of the importance of coordination of care between all people and organizations who work with someone recovering from a substance use or mental health problem. Targeted Outreach audiences for Concept 3:

- Social Service Providers
- Caregivers and Family
- Insurance Providers
- Health Care Providers

Below is the Planning Partner Discussion of the presented concepts..

Concept 1: *The Value of One's Community and Home*

- Lureen McNeil declared that she liked that one of the audiences is youth and young adults, anything that addresses that population is very important.
- George Bowden indicated that Concept 1 talks about community purpose and that by emphasizing that and working together, there is a lot of value in it.
- Beverly Haberly suggested the concept should emphasize an individual's, as well as family and friends', involvement in the recovery process.

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Concept 2: Owning Your Recovery

- Lureen McNeil reported that she liked Concept 2 better than Concept 1. Recently, her organization conducted focus groups across the State, and that family was the number one issue. She indicated that they have services for people who have an addiction, but families also go through a lot in the process and their pain is fresh, so it's important to focus on families, as they sometimes are not part of the solution.
- Cynthia Abrams announced that empowerment is part of long-term recovery, and anyone in the process is affected. She stated that it is important to feel empowered; and as a professional, it is important to pass that on to people so that they can see the beauty of recovery.
- Daphne Baille specified that she liked this concept, because empowerment is the opposite of stigma and shame. Treatment and recovery is a joyous thing and there is so much shame out there for people in recovery. Pride, empowerment and celebration.
- Page Chiapella mentioned that empowerment helps to support the idea that recovery works and treatment is effective.
- Vicki Griffiths announced that empowerment is the big picture.
- Daniel Payne stated that we should engage the recovery community and show positive examples of their recovery and empowerment in their recovery. We should empower community leaders in recovery to be voices for empowerment.
- Alan Levitt indicated that is not just about the individual with the substance use disorder, but also about the impact on the rest of the family. Empowering the family will help show the impact and positive benefits of recovery to all.
- Joe Powell declared that he liked this because the journey of recovery affects everyone. Integration of mental health and recovery is good. He stated that he would like to see more cultural diversity, such as Latinos, Asians and African Americans involved – that the language should engage them.
- Peter Gaumond mentioned that there are overlapping concepts in Concepts 1 and 2: they are really just one: empowering community. He stated that he agrees that recovery is a family and community process; it is multi-leveled.
- Joan Kub announced that she loves the idea of empowerment, and that we should add adolescents into the target audience, and educate with knowledge to gain control: it's not just knowledge but skills too.

Concept 3: Communication and Coordination of Care

- Nataki MacMurray stated that as a public health issue, we're all impacted and benefit by recovery. She indicated that we should showcase it as a health issue, and blend audiences from all three concepts. We should highlight specific issues for adolescents, and the military, and to further the mission of de-stigmatization.
- Mimi Martinez McKay announced that this is closest to health care reform as a theme, and that she could see a lot of blending of all three concepts. She stated that we should educate those affected by substance use and mental health problems; and that's everyone. If we target health care providers, it is critical to include information on how to provide those services. She also stated that there is a lot of confusion out there about how to find services. (Ms. Torres reminded the Partners that the 2011 Toolkit, currently in development is focused on health care reform.)

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- Beverly Haberly reported that there are many pathways to recovery, but there isn't necessarily knowledge about what that means. She indicated that there is still stigma around medication-assisted treatment, and that people need alternatives, so a message about many pathways to recovery is important. She also said that the criminal justice system needs to understand how things work operationally.
- Abdelwahab Alawneh declared that Concept 3 can be a process, a goal, and an objective.
- Daphne Baille announced that from a broad perspective she liked this concept, because we need to look at the whole system. She then asked: But who is the toolkit's audience? For her, this concept resonates for those who work in the system, but for a broader public we might lose them because it is an insider concept.
- Steve Hornberger stated that there is no wrong door to recovery and service coordination for those who are receiving care within the systems, this is a good concept. However, for someone in faith-based recovery, they might need something different.
- Claire Ricewasser suggested that including family and children is important. She stated that in Al-Anon, they have high member turnover, and that this is an opportunity to say that this is not a one-time problem, but an ongoing family issue.
- Bob Lindsay stated that he wanted to add to Daphne's comment on ***Recovery Month's*** audience and we should think about who is the audience for this concept. ***Recovery Month*** needs to engage and empower family.
- Peter Gaumond stated that we shouldn't send the message that receipt of services equal recovery.

Ms. Torres then put the 2012 concepts to a vote, with each partner being allowed one vote. The results of the voting on concepts were:

- Concept 1: 2 votes
- Concept 2: 28 votes
- Concept 3: 6 votes

Concept 2, *Owning Your Recovery*, was chosen as the 2012 theme. Planning Partners then discussed elements of Concepts 1 and 3 that they would like to see woven into Concept 2. These included:

- Daphne Baille specified that Concept 1 includes a very powerful sentence that should be included in the final concept and theme: *Also essential are the admirable steps individuals take to reach this goal and the positive changes they experience in their lives in recovery.* ***Recovery Month*** talks about transformation, not just sobriety.
- Claire Ricewasser indicated that we need to bring in an element from Concept 3 to help people buy in to recovery as a benefit to them also. Additionally, we should explicitly state that recovery improves the health of individuals, families, and communities.
- Kateri Vergez suggested that we need to include youth and young adults, perhaps as a target audience. It is important to get the idea of empowerment to young people in recovery because there is a stigma associated with it for youth. She stated that often they have issues at home and at school, so they need to feel empowered about their recovery, and they need to know that they are not alone.
- Lureen McNeil agreed with Ms. Vergez's comments.

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- Peter Gaumond mentioned that we need to include “we” not just “me” in whatever message we give. He said that the message of community still needs to be included.
- Beverly Haberly suggested that a call to action be included, such as “get involved.”
- Maryanne Frangules reminded everyone about the year we focused on families, and suggested that we should combine all three concepts and emphasize services, educate the public, and empower people.

Ms. Torres asked the Planning Partners to suggest taglines to follow: *Join the Voices of Recovery*. The following taglines were suggested:

- Together we can empower individuals, family and communities (Peter Gaumond)
- Many pathways to recovery (Kateri Vergez)
- Engaging and empowering individuals, families and communities (Cynthia Abrams)
- Just do it or another type of action language (Kent Gade)
- Empower, engage and get involved (Robert Lindsay)
- Everyone’s engaging in recovery
- Healing families and communities
- Educating, engaging and empowering individuals, families and communities
- Everybody’s doing it
- Recovery empowers everyone
- Creating hope, change, and empowerment
- Engaged, empowered, involved
- Get it, got it, do it
- Go for it
- Recovery rocks
- Everyday we do it
- Be heard
- It’s worth it
- Walk with a swagger
- Why not
- We’re worth it, I’m worth it
- It works

The Partners then voted on the suggested tag lines/themes and a run-off of the top three themes was conducted. Final results were:

- It’s worth it: 30 votes
- Healing families and communities 14 votes
- Everybody’s doing it: 4 votes

The 2012 Concept is *Owning Your Recovery*, with the following theme: *Join the Voices for Recovery: It’s Worth It*.

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III. Review of 2010 Accomplishments: Ivette Torres, SAMHSA/CSAT

Ms. Torres reviewed the ***Recovery Month*** 2010 accomplishments. The accomplishments were included in the *Final Report Executive Summary* (included in the meeting folders). The accomplishments included:

- 1,072 events were posted on the ***Recovery Month*** website, with a project attendance of 3,888,160 participants.
- The ***Recovery Month*** website (www.recoverymonth.gov) had 24,366,353 hits (40% more than 2009).
- 175 proclamations were posted in 2010.
- The *Road to Recovery* television series reached 23.6 million cable households and the radio series airs on 52 radio stations across the country (38 stations in 2009), reaching an estimated 4.9 million potential listeners.
- Dish Network, Channel 9412, through the University of Southern California, airs the *Road to Recovery* television series, reaching 20 million households, generating approximately \$288,000 annually in free airtime.
- The ***Recovery Month*** Facebook page increased by 58.6% adding 3,004 people who “like” the ***Recovery Month*** page in 2010, for a total 4,898 people now registered.
- The ***Recovery Month*** Twitter account launched January 27, 2010 at the ***Recovery Month*** Planning Partner’s Meeting and since the launch, the Twitter account garnered 1,038 followers and is included on 92 lists.
- The 2010 ***Recovery Month*** YouTube page channel views increased by 668.1%, for a total of 10,923 channel views overall and video views increased 580%, for a total of 5,917 video views overall. The YouTube Subscribers increased by 1485% adding 594 new subscribers in 2010, for a total of 634 total subscribers.

IV. Status of 2011 Materials: Sarah Ikenberry, Michele Monroe, Abraham Ruiz, and Ivette Torres, SAMHSA/CSAT

Observance Name Change

Ms. Torres discussed the November 2010 Survey Monkey survey sent by the National ATTC – Laurie Krom, querying the Partners on ***Recovery Month***’s name change. In the survey, the Partners were asked to vote on the name for ***Recovery Month***, since it would have to change from ***National Alcohol and Drug Addiction Recovery Month*** to be reflecting the incorporation of mental health. As a result of the survey, the observance’s name was changed to ***National Recovery Month***. The 2011 Kit and all new materials will include the change.

2011 PSAs

Mrs. Monroe reviewed the 2011 PSA storyboards (included in the meeting folder), which tested well in the focus group. Some changes were made in response to the focus group testing, which included:

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- For *Milestones*, “first day of recovery,” was added, and “in recovery” was added to the number of years that appear next to the people in recovery.
- For *Steps*, the terms, “substance use and depression,” were added, as was “mental health conditions.” “Benefits everyone” was also added to tie it into the 2011 theme.
- In both PSAs, changes were made to the helpline number to show the digits (in addition to the word “HELP”) because cell phones and smartphones don’t always have the same letters associated with the numbers.

The third storyboard in the folder, “RE,” will be a web/online PSA only, and will be in both English and Spanish.

During the focus groups, the participants were polled as to what the term, “behavioral health,” meant. The majority of focus group participants did not understand this term. Ms. Torres stated that ***Recovery Month’s*** challenge is to include mental health, substance use, and prevention language in all materials and to inform audiences about the meaning of behavioral health. All three SAMHSA centers (CSAT, CSAP, and CMHS) review and approve all of the ***Recovery Month*** materials.

The difference between the language being used for professionals in the field and the general public, was discussed including “substance use disorders” may be appropriate an appropriate term for professionals, but “addiction” is more widely used by the general public. Additionally, Mrs. Monroe stated that the prevention community also dislikes use of the word “responsible” because it ties in to “drinking responsibly.” Therefore, the word “responsible” can have a different meaning/connotation in a different context. Lureen McNeil stated that we need to do some work around the language on “recovery.” Ms. Torres reminded the Partners that there was a *Road to Recovery* show on language last year. James White commented that in States and Counties they often use different language than the Federal government or people in the field, and that when an organization applies for funding, they have to use the language of the funder. The language organization’s use is dictated by their funders and funding.

2011 Events

Abraham Ruiz reported that the 2011 SAMHSA-funded events will be posted and submitted to contracts as soon as the budget office notifies Consumer Affairs of the final budget for the office.

2011 Social Media and Website

Sarah Ikenberry reported on the social media and website. Mrs. Ikenberry announced that the outreach and social media engagement will continue at the same level in 2011 to increase awareness online. She stated that the Twibbon, the Flickr Challenge, Facebook, Twitter and YouTube activities would all continue. She announced that there are several new media activities in 2011, which might include text alerts for events by geographic area, a Twitter chat to highlight Partner organizations and expertise, and a Facebook group for event planners with tips and facts, among others.

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V. Odyssey Network Mobile Phone Application: Bill Reilly and Mat Tomber, Odyssey Networks

Bill Reilly, Odyssey Networks, introduced Mat Tomber, head of Odyssey's New Media Division. Mr. Tomber and Mr. Reilly presented a mobile phone application launched by Odyssey Networks, *Call on Faith*, which brings their inspirational and informative videos to people's smartphones. He stated that Odyssey wants to create an application that addresses the recovery community, with a particular emphasis on youth. To answer the questions, *What would people in recovery want as a time out on their phone? What kind of content?*, Odyssey is reviewing online content from organizations, including Hazelden, NACoA, Alcoholics Anonymous, and Al-Anon and repurposing existing content in a 90-second to 3-minute videos. The videos would be available via a mobile phone application, so that people in recovery could view them in the course of their day as a motivational tool. He said that Odyssey would partner with these organizations, edit their material, and develop the application to be graphically pleasing. Building on the success of the *Call on Faith* application, Odyssey requests the assistance of the Partners in identifying what people in recovery would want to see and use on a daily basis. The application will be devoted solely to the recovery community, and Odyssey hopes to offer it as a free product. Mr. Reilly concluded the presentation, by asking if anyone is interested in being part of the development process to provide insight on what would be useful in the application, please contact him via email (breilly@odysseynetworks.org). It was suggested to include people from all faiths, as well as atheists, in the development process.

VI. *Twelve*: Jack Sinclair, YRD Productions

Jack Sinclair, YRD Productions, showed the trailer for *Twelve*, a documentary about youth in recovery that works on the level of peer-to-peer communication (www.12recovery.com). He stated that youth really relate to this documentary, and that it's great for schools, prevention centers, drug courts, etc. For additional information on *Twelve*, please contact Mr. Sinclair at 405-842-2334 or jsinclair@cox.net.

VII. SAMHSA's Communications Efforts: Mark Weber, SAMHSA's Office of Communications

Ms. Torres introduced Mark Weber, Director of SAMHSA's Office of Communications. Mr. Weber presented on SAMHSA's approach to communications. SAMHSA is trying to raise the profile of the agency within HHS and the government. Mr. Weber said that the health care reform and parity laws have changed the landscape for mental health and recovery services, as well as the world in which SAMHSA provides services. Additionally, mental health problems and substance use disorders are now part of the health system. The National budget, as President Obama stated, will remain at a level funding level for the next five years. SAMHSA will release their budget after President Obama releases his. SAMHSA will invite people to comment on their budget.

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SAMHSA's task has been to look at how SAMHSA currently functions, how to make the most of resources, and how to take advantage of opportunities that have presented themselves. Eight Strategic Initiatives guiding SAMHSA's services currently exist (<http://www.samhsa.gov/about/strategy.aspx>):

- Prevention of Substance Abuse and Mental Illness
- Trauma and Justice
- Military Families
- Health Care Reform Implementation
- Housing and Homelessness (will be Recovery Support)
- Health Information Technology
- Data, Outcomes, and Quality
- Public Awareness and Support

SAMHSA conducted an extensive public comment period on their Strategic Initiatives with over 24,000 people commenting. Through the process, several things became clear: that the workforce needed to be included in each of the initiatives and people were unhappy about the lack on inclusion of recovery. Therefore, the Housing and Homeless Initiative is being restructured to include recovery and recovery support services for people with mental health problems, co-occurring disorders, and substance use disorders.

One of the initiatives is public awareness and support. The long-term vision for that initiative is to use a marketing approach for public education and develop communications programs designed to achieve the full potential of prevention, so that people seek help for substance use disorders and mental health problems. SAMHSA is going to change the way that people think about mental health problems and substance use disorders by increasing the public understanding of them.

SAMHSA is creating a cohesive SAMHSA identity and branding presence, that they are going to act as "One SAMHSA" and advance SAMHSA's strategic initiatives through communications. He said that they want to treat mental health problems and substance use disorders as any other health issue. He said that they are now looking at SAMHSA's portfolio of programs contracts, grants, and purchase orders and are trying to manage a two-part process. The process includes initiating a review process where SAMHSA is reviewing all of the publications currently in development and aligning the publications and products with the Strategic Initiatives. Additionally, as SAMHSA consolidates its web presence around the Strategic Initiatives, on January 1, 2011, SAMHSA took down 22 websites. Based on the feedback they received, some of the content and websites will be restored.

In September 2010, SAMHSA released its new website, www.samhsa.gov, which is currently undergoing usability testing. Additionally, SAMHSA has also ventured into social media, blogging, and incorporating real time information on the website. For future contracts, SAMHSA requires that the content developed must be easily accessible online and encourages the use of new technology.

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Moving forward, SAMHSA is developing communications plans for each of the Strategic Initiatives. Mr. Weber then proceeded to answer questions and comments posed by the Planning Partners.

Question/Comment (John de Miranda): Across the country, SAMHSA funds mental health centers to provide mental health services. In the push to integrate mental health and substance use services, will SAMHSA add additional funding or require the centers to provide funding to substance use treatment facilities?

Answer (Mark Weber): As SAMHSA reviews its list of products and programs, one of the criteria for them is to determine if it already has a behavioral health component. People should feel free to call them on anything that isn't comprehensive.

Question/Comment (Mimi Martinez McKay): What will SAMHSA do to compel the States to do the same types of initiatives as SAMHSA.

Answer (Mark Weber): Building off a supplement to the Substance Abuse Prevention and Mental Health Block Grants' applications asking what grantees need,): SAMHSA is revising the Substance Block Grants application to help align the State's services with SAMHSA's.

Question/Comment (Pat Taylor): Building off of the *ONDCP/SAMHSA Recovery Summit*, mental health and substance use need to be both discussed. Programmatically, we want to talk about recovery from each of those, the differences and the benefits of both.

Answer (Mark Weber): SAMHSA is trying to find the path and embrace the concept that recovery is different for every individual in this country. Recovery is the gift of the substance use community to the mental health community and recovery is the gift of both those communities to the health system. He said that SAMHSA is grappling with the issue, and its commitment to recovery is unwavering. SAMHSA and the substance use and mental health communities are all going to get there together, and it is important to keep the national recovery movement going.

Language and Terminology

Question/Comment (Peter Gaumond): For language and processes, it might be useful to foster further communication and clarification regarding the language used by SAMHSA, like "substance use disorder." The language used by SAMHSA might not be appropriate or user-friendly to the treatment and recovery community. He suggested that SAMHSA develop a forum to discuss these items over time. Mr. Gaumond also asked for Mr. Weber to provide insight and clarification on current projects that use web technology, as project-related or communication vehicles.

Answer (Mark Weber): Regarding terminology, one of the objectives is to come up with behavioral health terminology, and to that end a group of agencies including HRSA, CDC, and the FDA convened

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the Behavioral Health Coordinating Council across HHS in pursuit of the inclusion of mental health in everything HHS does. Mr. Weber stated that he is being held accountable for developing a common set of terminology that will be used across HHS. He said that he believes it is all about the target audience and reaching them in the right way: that we have the responsibility to be responsive to our target audiences.

Question/Comment (Steve Hornberger): Further discussing the question about language, asking how much does what we've learned applies to how we communicate to the target audiences? Educating audiences is part of the process.

Answer (Mark Weber): Trying to balance it all will be a challenge.

Question/Comment (John Shinholser): The language used in the grants can separate out some of the most useful pathways to recovery. The grant process is complicated by the language it uses, and this community takes the language very seriously. He would like to suggest that SAMHSA keep the most useful pathways of recovery in the grant process and to not include language that disenfranchises those who provide services under those pathways. He said that recovery is a simple process, the simpler we keep the process and the language, the more people will be helped in the process. "Addiction" and "Alcoholism" are words people understand and are a major thing in our country. Keep it simple and keep the real people in the game.

Answer (Mark Weber): By looking at terminology and the words that we use, we're looking for consistency. SAMHSA/CSAT asked their grantees about the language in its grants and asked them what their definition of the word "program" is. There is no easy answer to this question, there were many different answers.

Question/Comment (Alan Levitt): The language issue transcends SAMHSA, because both self stigma and societal stigma are barriers, and that the stigma for military families needing treatment or recovery is that such a need is perceived as a weakness. A cohesive effort to reach out specifically to select audiences, such as the military, needs to exist.

Answer (Mark Weber): The government has come a long way on this issue and SAMHSA is working to improve the focus on and services to the military and its families. The Strategic Initiative focused on Military Families provides one mechanism to expand SAMHSA's services to this population.

Question/Comment (Cynthia Moreno Tuohy): There is a terminology issue: counselors in NAADAC are in recovery too, and the terminology that they use in their profession and for themselves is very specific. They don't want it watered down and they want the correct professional industry terms to be used. She said that behavioral health is too general and it is not correct, that language used should include addictive disorders, with specific treatments, tools, etc used for the addiction disorders that are being referenced.

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Answer (Mark Weber): As guidelines develop, SAMHSA will be moving towards being more specific in the use of terminology for specific behavioral, mental health, and substance use disorders. SAMHSA wants to be consistent and specific in the language that it uses.

In closing, Mr. Weber expressed his appreciation for the Planning Partners' attention and comments.

VIII. *Recovery Month* Subcommittee Reports

Evaluation Committee – Ben Jones, NCADD-Detroit

Mr. Jones reported that SAMHSA/CSAT has been working with Abt to develop with a ***Recovery Month*** evaluation plan, and a corresponding budget. After discussion and approval by SAMHSA, the evaluation committee will be engaged as part of the process.

Multimedia Committee – Bill Beard, ICF/Macro, Diane Fraser, Abt Associates, and Heather Stephenson, Edelman

Mr. Beard reported that ICF/Macro produces the *Road to Recovery* Programs. He reported that the 2011 Program series was modified to include mental health in its content. Mr. Beard reviewed the 2011 program series schedule and program abstracts, which were included in the meeting folders. He also reported that as part of the programs, segments of real people in recovery telling their recovery stories would be included.

Ms. Torres stated that SAMHSA/CSAT is working with SAMHSA/ CMHS, on the launch of their 'Ten by Ten' campaign. SAMHSA/CSAT offered to do an extension of the program series with an additional show to potentially partner with SAMHSA/CMHS on that campaign.

Diane Fraser reported that there were enhancements made to the 2011 website that included adding a *Gratitude and Support* page, a home page *Features* section, and the Community Events PSA. Ms. Fraser reported that in 2010, there were over 24 million hits and over 1.6 million visits to the website.

Heather Stephenson reviewed the successes of the social media activities in 2010, which included an increase in the event widget users, and increases to the subscribers and user responses on Facebook and Twitter, as well as an increase to the subscribers and video views on YouTube. The 2011 Planning Partners web banners are available for download on the website (<http://www.recoverymonth.gov/Planning-Partners/Planning-Partner-Banners.aspx>). **Please download and post them to your organization's websites.**

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Sustainability and Public Relations Committee – Ivette Torres, SAMHSA/CSAT

Ms. Torres reported that the committee had a conference call and to discuss ideas regarding the public relations and sustainability of **Recovery Month**. A key factor in the sustainability of **Recovery Month** is the **Recovery Month** luncheon. The committee should create a cluster of organizations that have already hosted the luncheon, such as NAADAC, Al-Anon, NACoA, EIC, Faces and Voices of Recovery, and CADCA. Ms. Torres said that NCADD will host the 2011 **Recovery Month** luncheon. There may be a ticket cost per person for the luncheon.

Toolkit Committee – Daphne Baille, TASC, Inc.

Daphne Baille thanked all of the people who were part of the Toolkit review process. Sara Jacobson told the Partners that we need recovery vignettes for the 2011 Toolkit. A vignette does not have to be submitted by someone who has personally experienced a substance use disorder and recovery. This year, vignettes will also include those who suffer from a mental health problem or who are successfully managing one in their daily lives. Additionally, a person who works in the substance use and mental health problem or recovery community or who has been directly impacted can submit a story. It would be helpful to have vignettes about or relating to the 2011 Targeted Outreach audiences (policymakers, consumers—which encompasses individuals of all ages, the workplace and health care providers)

The vignettes must:

- Be very brief – no more than two short paragraph in length (300 words).
- Be accompanied by a signed consent form (which can be downloaded from the **Recovery Month website**, <http://www.recoverymonth.gov/Voices-for-Recovery/~media/Images/Files/Hold%20Harmless%20Form/UpdatedVoicesforRecoveryHoldHarmlessForm2011.ashx>). If the vignette features a minor, the signature of a parent or guardian is also required.
- Include a high-resolution photograph at least 1mb in size (Adobe EPS files preferred; otherwise, any format is acceptable except a photo embedded in a Word file, which cannot be used).

This year, the vignettes will be printed in a poster format that will be included in the hard-copy toolkit, which can be easily displayed at **Recovery Month** events. Additionally, the stories will be included online and throughout the Targeted Outreach section as in past toolkits. Due to this new format, the word count of each story will be strictly enforced.

Vignettes can be sent to Virginia Pond, Virginia.Pond@edelman.com.

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X. Upcoming Meeting Dates

The 2011 ***Recovery Month*** Planning Partners Meeting dates are:

- Wednesday, March 23, 2011 – Hilton Crystal City at Washington Reagan National Airport, 2399 Jefferson Davis Highway, Arlington, Virginia 22202
- Wednesday, June 15, 2011 – via conference call, call-in number to be provided
- Wednesday, September 7, 2011 – Hilton Crystal City at Washington Reagan National Airport, 2399 Jefferson Davis Highway, Arlington, Virginia 22202
- Thursday, September 8, 2011 – ***Recovery Month*** National Kick-off and National Survey on Drug Use and Health (NSDUH) Release Press Conference – National Press Club, Washington, DC; followed by the ***Recovery Month*** Luncheon, sponsored by NCADD, location (to-be-determined)